PTO/SB/21 (09-04)
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TRANSMITTAL FORM			Application Number	10/803,008	10/803,005							
			Filing Date	March 17,	March 17, 2004							
			First Named Inventor	Robert T. 8	Robert T. Ellingson							
			Art Unit	4422	4422							
(to be used for all correspondence after initial filing)		Examiner Name	Gilbert, Wi	Gilbert, William V.								
Total Number of Pages in This Submission		Attorney Docket Number	A042 1100	A042 1100.1								
ENCLOSURES (Check all that apply) After Allowance Communication to TC												
Charge Deposit Account Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement		F F F C C T F F F F F F F F F F F F F F	retition retition to Convert to a provisional Application cower of Attorney, Revocation change of Correspondence Address ferminal Disclaimer request for Refund co., Number of CD(s)		Appeal Communication to Board of Appeals and Interferences Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below):							
Incomplet	Missing Parts/ e Application eply to Missing Parts der 37 CFR 1.52 or 1.53	TURE O	F APPLICANT, ATTO	DRNFY C	OR AGI	FNT						
Firm Name				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,								
	Womble Carlyle Sandridge	& Rice, F	PLLC									
Signature	Chalkin	The										
Printed name	Charles K. Middleton											
Date September 12, 2006			Reg. No. 60,275)						
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Eggs numbers to t	Complete if Known											
Fees pursuant to t	Application Number		10/803,005									
FEE	Filing Date		March 17,									
	First Named Inventor		Robert T. Ellingson									
Applicant -U	Examiner Name		Gilbert, William V.									
Applicant cla	+		4422									
TOTAL AMOUN	Attorney Docket No. A042 11		A042 1100	00.1								
METHOD OF PAYMENT (check all that apply)												
Check Credit Card Money Order None Other (please identify):												
Deposit Account Deposit Account Number: 09-0528 Deposit Account Name: Womble Carlyle et al.												
For the ab	For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)											
✓ Cha	Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee											
	arge any additiona		erpayments of fe	e(s) Credi	t any ove	erpayments						
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FEE CALCULA	thorization on PTO	2038.										
		ND EVARALL	ATION CCC						-			
1. BASIC FILIN		ND EXAMINA NG FEES		CH FEES	EXAN	/INATION F	EES					
Application T	ype <u>Fee (</u>	\$ Small Enti		Small Entity	Fee	Small E	ntity	Fees Paid (\$)	ļ			
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Design	210		100	50	130	200						
Plant	210		310	30 155	160							
Reissue	310		510	255	620	•						
Provisional	210	100	0	0	02(
2. EXCESS CL		105	U	U	,	, 0	s	mall Entity				
Fee Description	<u>on</u>				·) (\$)	Fee (\$)					
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Multiple dependent claims <u>Total Claims</u> <u>Extra Claims</u> <u>Fee (\$)</u> Fee				Paid (\$)				endent Claims				
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HP = highest number of independent claims paid for, if greater than 3.												
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer												
listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50												
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)												
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) - 100 = /50 = (round up to a whole number) x												
4. OTHER FEE(S) Fees Paid (\$)												
Non-English Specification, \$130 fee (no small entity discount)												
Other (e.g., late filing surcharge):												
SUBMITTED BY	<u> </u>											
Signature	Registration No. (Attorney/Agent)	30,275	T	elephone	(404) 879-2479							
Name (Print/Type)	Charles K. Middle	L	,/			ate Septe	ember 12, 2006					

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